

#3

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tesa AG 1516-KGB
2100-Dr. He-ar

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT : DR. THORSTEN KRAWINKEL
SERIAL NO. : 10/076,822
FILED : February 15, 2002
FOR : ADHESIVE SHEET STRIPS
ART UNIT : TO BE ASSIGNED
EXAMINER : TO BE ASSIGNED

April 22, 2002

Hon. Commissioner for Patents
Washington, D.C. 20231

**COMMUNICATION RE: FILING OF DECLARATION ON
A DATE LATER THAN THE FILING DATE OF THE APPLICATION**

Sir:

This is in response to the Notice to File Missing Parts of Application under 37 CFR
1.53(b) **March 11, 2002**, in the above-identified application. A copy of said Notice is attached
hereto.

It is requested that the papers submitted herewith be joined up with the papers previously
filed in this Application.

Applicant is:

☐ a small entity

☒ other than a small entity

DR. THORSTEN KRAWINKEL
USSN 10/076,822

It is requested that the surcharge for the filing of the Declaration be charged to the undersigned's Deposit Account No. 14-1263.

Please charge:

- ☐ \$ 65.00 for small entity
☒ \$130.00 for other than small entity.

An extra copy of this communication is appended hereto for accounting purposes.

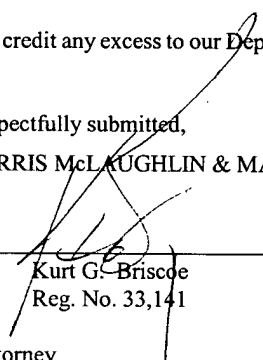
CONDITIONAL PETITION FOR EXTENSION OF TIME

If any extension of time for this response is required, applicant requests that this be considered a petition therefor. Please charge the required Petition fee to Deposit Account No. 14-1263.

ADDITIONAL FEE

Please charge any insufficiency of fees, or credit any excess to our Deposit Account No. 14-1263.

Respectfully submitted,
NORRIS McLAUGHLIN & MARCUS, P.A.

By 
Kurt G. Briscoe
Reg. No. 33,141

KGB/ja
Enc. - Combined Declaration and Power of Attorney
- Copy of Notice of Missing Parts

220 East 42nd Street -30th Floor
New York, New York 10017
Tel.: (212) 808-0700
Fax: (212) 808-0844

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DR. THORSTEN KRAWINKEL
USSN 10/076,822

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Services as first class mail in an envelope addressed to: Commissioner of Patents, Washington, D.C. 20231 on 4-6-02

NORRIS McLAUGHLIN & MARCUS, P.A.

By _____

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Page 1 of 1



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/076,822	MAY 06 2002	Thorsten Krawinkel	tesa AG 1516-KGB

27384
KURT BRISCOE
NORRIS, MCLAUGHLIN & MARCUS, P.A.
220 EAST 42ND STREET, 30TH FLOOR
NEW YORK, NY 10017

CONFIRMATION NO. 2017
FORMALITIES LETTER



OC000000007617351

Date Mailed: 03/11/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

05/07/2002 SZEWDIE1 00000037 141263 10076822

01 FC:105 130.00 CH

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Patent and Trademark Office: U.S. Department of Commerce
Control number.



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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

	Application Number	10/076,822
	Filing Date	February 15, 2002
	First Named Inventor	DR. THORSTEN KRAWINKEL
	Group Art Unit	TO BE ASSIGNED
	Examiner Name	TO BE ASSIGNED
Total Number of Pages in This Submission	Attorney Docket Number	101769-127/tesa AG 1516-KGB

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> To convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): -Copy of Notice to File Missing Parts -Combination Declaration and Power of Attorney
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Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kurt G. Briscoe, Esq. NORRIS McLAUGHLIN & MARCUS, P.A.
Signature	 Reg. No. 33,141
Date	4-26-02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Hon. Commissioner of Patents, Washington, D.C. 20231 on this date:

Typed or printed name	Kurt G. Briscoe
Signature	
Date	4-26-02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Hon. Commissioner of Patents, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$130.00

Complete if Known

Application Number	10/076,822
Filing Date	February 15, 2002
First Named Inventor	Dr. Thorsten Krawinkel
Examiner Name	To Be Assigned
Group Art Unit	To Be Assigned
Attorney Docket No.	101769-127 / tesa AG 1516-KGB

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number
Deposit Account Name

14-1263

Norris, McLaughlin & Marcus

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 180	214 80	Provisional filing fee	

SUBTOTAL (1) \$0.00

2. EXTRA CLAIM FEES FOR UTILITY AND

Extra Claims	Fee from below	Fee Paid
Total Claims -20** = 0 X	18.00 =	0.00
Independent Claims -3** = 0 X	84.00 =	0.00
Multiple Dependent		

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 84	202 42	Independent claims in excess of 3
104 280	204 140	Multiple dependent claim, if not paid
109 84	209 42	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	130.00
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non - English specification	
147 2,520	147 2,520	For filing a request for ex parte reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
118 400	216 200	Extension for reply within second month	
117 920	217 460	Extension for reply within third month	
118 1,440	218 720	Extension for reply within fourth month	
128 1,960	228 980	Extension for reply within fifth month	
119 320	219 160	Notice of Appeal	
120 320	220 160	Filing a brief in support of an appeal	
121 280	221 140	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,280	241 640	Petition to revive - unintentional	
142 1,280	242 640	Utility issue fee (or reissue)	
143 460	243 230	Design issue fee	
144 620	244 310	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR § 1.17(q)	
126 180	126 180	Submission of Information Disclosure Statement	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))	
179 740	279 370	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$130.00

SUBMITTED BY

Name (Print/Type)

Kurt G. Briscoe

Registration No. (Attorney/Agent)

33,141

Telephone

(212) 808-0700

Signature

Date

4-26-02

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SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.		<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>BOX MISSING PARTS ASSISTANT COMMISSIONER FOR PATIENTS WASHINGTON, DC 20231</p>		<p>B. Received by (Printed Name) C. Date of Delivery</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from service label) 7000 1670 0009 0095 0893</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

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